PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10791450

					<u> </u>	() ()						
CLAIMS AS FILED - PART I							s	MALL	ENTITY		OTHE	R THAN
TOTAL CLAIMS			(Column 1)		(Column 2)		1 T	YPE		OR	•	ENTITY
			10	(0				RATE	FEE		RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		ASIC FE	E 385.0	OR	BASIC FEI	770.00
TOTAL CHARGEABLE CLAIMS			10 m	ninus 20=	* (•		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			\ i	ninus 3 =	* 0)		X43=	1	OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM	PRESENT	•			-		 			
* 11	the differenc	e in column 1 is	s less than :	less than zero, enter "0" in co			Ļ	+145=	D 000	OR	+290=	
				MENDED - PART II				TOTAL	385	OR	TOTAL	Ĺ
		(Column 1)	AMENDE	(Column 2) (Column 3)				I IAMS	ENTITY	OR	OTHER	
		CLAIMS		HIGHE		(Coloriii 3)	. —			- On.	SIIIALL	C/41///
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
NDN	Total		Minus	**		=	;	X\$ 9= .		OR	X\$18=	
AME	Independent	*	Minus	***	<u>. </u>	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u> -	·				
								145=		OR	+290=	
		_	•				ADI	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= :	×	(\$ 9=		OR	X\$18=	
AM	Independent	*	Minus	***		=		(43=		OR	X86=	
!	- PHESE	NTATION OF ML	JLTIPLE DE	PENDENT C	LAIM		+	145=		OR	+290=	
								TOTAL		_	TOTAL	
		(Column 1)		(Column 2) (Column 3)			ADD	IT. FEE L		Ι Α	DDIT. FEE L	
Т	`	CLAIMS		HIGHES	T 1	(Octamin 3)						
AMENDMENIC	·	REMAINING AFTER AMENDMENT		NUMBE PREVIOU: PAID FO	R SLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
֓֞֝֟֝֟֝֟֟֟֝֟֟֟	Total	*	Minus	**		=	X	5 9=		OR	X\$18=	
	Independent		Minus	***		=	Υ.	43=		·-	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	''- +		OR _	∧00=	
*]f	the entry in solve	+1	45=		OR	+290=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
TI	ne "Highest Numb	per Previously Paid	For" (Total or	Independent)	iss than is the h	3, enter "3." lighest number (opriate box	in colum	nn 1.	